## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Patent Number	7,164,410				
Issue Date	January 16, 2007				
First Named Inventor	Sig G. Kupka				
Group Art Unit	N/A				
Examiner Name	N/A				
Attorney Docket Number	23412-7847				

To: Commissioner for P.O. Box 1450 Alexandria, VA 22								
I hereby apply to withdraw as attorney or agent for the above identified patent application. The client has been duly notified this request for withdrawal and provided with all papers and property to which the client is entitled.								
The reasons for this request are:								
The client knowingly and freely assents to termination of the employment. The client discharged the practitioners designated below by instructing that the subject application be transferred to other patent counsel. The client and the new patent counsel have been informed of upcoming docketed items pertaining to the subject application.								
The correspondence address is NOT affected by this withdrawal.								
2.   Change the correspondence address and direct all future correspondence to:								
Firm or Individual Name	Amir H. Raubvogel, Attorney at Law							
Address	820 Lakeview Way							
Address								
City	Redwood City	State	CA	Zip	94062			
Country	USA							
Telephone	(650) 209-4884	Fax	(650) 362-1800					
This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number								
Name	Amir H. Raubvogel							
Signature	/ Amir H. Raubvogel/							
Date	March 23, 2007							
NOTE: Withdrawal is effective when approved rather than when received.  Unless there are at least 30 days between approval of withdrawal and the expiration date of a time enging for response or nessifie by extension period, the requirest to withdraw is promatly disapproved.								